	State of Rhode Island and Providence Plantations Office of the Secretary of State	Fee: \$20.00
	Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040	
HOPE		
Foreign Limited Liability Company Statement of Change of Resident Agent		
(Section 7-16-10 of the General Laws of Rhode Island, 1956, as amended)		
	SECTION I	
The name of the limite	ed liability company is	
GREIF PACKAGIN	<u>IG LLC</u>	
	SECTION II	
The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:		
10 DORRANCE STREET, SUITE 700 PROVIDENCE, RI 02903		
The name of the regist of State is:	stered agent as PRESENTLY shown in the records on file with the Rhode	Island Secretary
UNITED AGENT GRO		
	SECTION III	
The NEW address of t	the resident agent is:	
No. and Street: <u>222 JEFFERSON BOULEVARD</u> SUITE 200		
	<u>RWICK</u> State: RI	Zip: <u>02888</u>
The name of the NEW	V resident agent is: <u>CORPORATION SERVICE COMPA</u>	<u>.NY</u>
SECTION IV		
The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.		
or individuals signification of signatory, under per and deed of the com	of September, 2019 at 11:03:25 AM. This electronic signature of ng this instrument constitutes the affirmation or acknowledgement nalties of perjury, that this instrument is that individual's act and ppany, and that the facts stated herein are true, as of the date of the with R.I. Gen. Laws § 7-16.	it of the deed or the act
GREIF PACKAGIN Print Name of Limited		

GARY R. MARTZ

Signature of Authorized Person

Form No. 642 Revised 09/07

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